Amendments to the Drawings:

The attached replacement sheets include changes to Figure 10B. In Figure 10B, the term "APPROPRIATE" has been amended to be spelled correctly.

Attachment: Replacement Sheet

Annotated Sheet Showing Changes

Remarks

Claims 1-52 are pending.

Claims 1-52 stand rejected.

Claims 1-36, 43, 45-46, 48 and 51-52 have been cancelled.

Claims 37-41, 44, 47 and 49-50 have been amended.

Claims 53-57 have been added.

Claims 37-42, 44, 47, 49-50 and 53-57 are submitted herein for review.

No new matter has been added.

In paragraph three of the Office Action, the Examiner has objected to Figure 10B for containing a mis-spelling. Applicants have Amended Figure 10B accordingly and respectfully request that this objection be withdrawn.

In paragraphs 4-33 of the Office Action, the Examiner has rejected and objected to claims 1-52 for a number of technical reasons. Applicants have cancelled claims 1-36, 43, 45-46, 48 and 51-52, and amended claims 37-41, 44, 47 and 49-50 and respectfully submit that these rejections should be withdrawn in view of the claim clarifications.

The Examiner has rejected the claims as being unpatentable over Hull (U.S. Patent No. 6,665,086) in view of James et al. (U.S. Patent No. 6,742,161). The claims are also rejected as

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unpatentable over Rozen (U.S. Patent No. 6,073,106) in view Melen (U.S. Patent No. 6,426,806).

Applicants disagree with the Examiner's assertions and submit the following remarks in response.

Applicants begin by noting that an IDS is being filed herewith for consideration when reviewing the claims as Amended herein.

Turning to the rejections, Applicants note that claims 1-36, 43, 45-46, 48 and 51-52 have been cancelled. As such the rejection of these claims is moot.

Remaining independent claim 37 is directed to a method for medical record management that includes receiving a transmissions from a plurality of health care providers via a facsimile device. The transmission includes a facsimile image of a document containing medical information relating to a patient of said medical facility, along with a separate facsimile form having a first coded information thereon.

The first coded information is used to associate said document with an account relating to said patient. The separate facsimile form further has a second coded health care provider identifier. This coded health care provider identifier identifies a health care provider submitting the document containing medical information.

A plurality of transmissions are received at the processor from the plurality of health care providers. Each transmission includes documents containing medical records relating to a plurality of the patients and the separate facsimile form, sent from said plurality of health care providers.

The processor automatically stores the images of the transmissions in a memory location relating to one of the patient accounts associated with the first coded information on the separate

facsimile form and further associates the images of the transmissions with the separate coded health care provider identifier.

The images may then be provided from the account associated with said first coded information to an authorized user at a user designated device in response to a request.

Independent claim 41, directed to a transmission paper, likewise includes an additional second coded health care provider identifier that identifies a health care provider submitting the document containing medical information.

Such an arrangement is advantageous in that allows transmission of medical records of patient to a central location for storage in association with their account. Furthermore, by having a second health care provider identifier, the medical records submitted are further categorized so that records from one doctor are not mixed with records from another doctor. This allows the patient in control of the account to better manage and organize access to their medical history.

None of the cited prior art references, either alone or in combination with one another, teach or suggest such an arrangement. For example, none of the prior art references teach or suggest a second coded health care provider identifier that identifies a health care provider submitting the document containing medical information. Likewise, none of the cited prior art references, either alone or in combination with one another, teach or suggest the processor automatically storing the images of the transmissions in a memory location relating to one of the patient accounts associated with the first coded information on the separate facsimile form and further associates the images of the transmissions with the separate coded health care provider identifier.

For at least these reasons, Applicants respectfully request that the rejection of pending claims 37-42, 44, 47, 49-50 and 53-57 be withdrawn.

Dated: 10/31/07

In view of the foregoing Applicants respectfully submit that pending claims 37-42, 44, 47, 49-50 and 53-57 are now in condition for allowance, the earliest possible notice of which is earnestly solicited. If the Examiner feels that an interview would facilitate the prosecution of this Application he is invited to contact the undersigned at the number listed below.

Respectfully submitted,

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APPENDIX

